

PATENT  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Simon Monk et al.	)	Examiner: Rangrej, Sheetal
		)	
Serial No.:	10/692,321	)	Art Unit: 3686
		)	
Filed:	Oct. 22, 2003	)	
		)	
For:	“A System and Method for Providing an Insurance Product”	)	Our Ref: B-5273 621389-7
		)	
		)	Date: September 6, 2011
		)	
		)	Re: <i>Appeal to the Board of Patent Appeals</i>

**BRIEF ON APPEAL**

Commissioner for Patents

Sir:

This is an appeal from the Final rejection dated January 19, 2011 for the above identified patent application. The fee set forth in 37 C.F.R. 41.20(b)(2) for submitting this Brief has been paid concurrently with this electronic submission. Appellants submit that this Appeal Brief is being timely filed and is in support of the Notice of Appeal filed on July 18, 2011.

**REAL PARTY IN INTEREST**

The present application has been assigned to Surecan Technology Pty, Ltd., Level 10, 1 Bligh Street, Sydney, NSW 2000, Australia.

**RELATED APPEALS AND INTERFERENCES**

There are no other appeals or interferences related to the present application.

### **STATUS OF CLAIMS**

Claims 25-37 are pending in this application, stand rejected, are the subject of this Appeal, and are reproduced in the accompanying appendix.

### **STATUS OF AMENDMENTS**

No Amendment after Final Rejection has been entered.

### **SUMMARY OF CLAIMED SUBJECT MATTER**

The invention described and claimed in the present application relates to a system and method for providing an insurance product. The insurance product is provided via a computing network, and the method comprises the steps of issuing an insurance product to a subscriber, and allowing the subscriber to access the computing system through a network, so as to vary at least one term of the already issued insurance product. Unlike other insurance sales systems, the system and method of the present application allow a subscriber to modify the original insurance policy after the policy has already been issued, such as requesting an extension. Rather than issuing a new policy, the original policy is retained. (page 14, lines 28-29) In the prior art, requesting modification of a term of the original policy results in the original policy being cancelled, and a new policy being written, priced and then issued.

Insurance policies are generally priced by the consideration of risk over a predefined period of time. By considering the total risk exposure of an underwriter, the underwriter is able to price the premiums of the policy in question. As such, the duration of the policy, representing the risk exposure of the underwriting over a specific period of time, is an important component in the valuation of the required premiums paid for each insurance policy. A policy may also be priced by the consideration of various factors, such as the risk profile of a subscriber. The underlying aspect to pricing an insurance policy is always the time period of the risk. As such, once an insurance policy is issued, the risk assessment of the predetermined period of time in

which the policy is effective is then "locked in" since the premium has now been paid and the policy is in effect. By "locking in" the predetermined period of time, the underwriter is therefore able to correctly price a policy based on a fair representative of the total risk exposure of the underwriter for the policy.

Accordingly, once the underwriter is made aware of the total risk for the policy, and has been paid for its issuance, it is no longer possible to simply extend the insurance policy by a day, week or month as there is no linear relationship which would represent a risk assessment of extending the issued insurance. As such, it becomes difficult, or impossible to form a fair variation price for this extension of term once the insurance policy has been issued.

This limitation results in an inability for insurance underwriters to modify a policy after it has been issued. Instead, in the prior art, to obtain an insurance policy with different terms and conditions, the ongoing original policy is cancelled and a new policy capturing the variations is completely rewritten, re-priced and reissued to the subscriber.

In these circumstances, travelers often find it difficult to amend their insurance policies should they alter their travel plans since the steps for cancelling and reissuing a policy are difficult and time costly.

In the present application, Applicant's insurance system utilizes an object model which models and continues to model the attributes (risk profile for a specific time period) of the insurance policy after the policy has been issued. The object model continues to exist on the system for each issued policy so that the insurance sales system can continue to calculate a fair price for any customer's alteration to the policy without the necessity of cancelling the existing original policy and rewriting, repricing and issuing a new policy. The object model is used to continuously model the issued insurance policy so that alterations to the policy may be made after the policy has been issued. (page 13, line 3 to page14, line 29) Also, see the example on page 10, lines 20-29 and description on page 14 lines 19-29.

### **Claimed Invention**

The principal claims involved in the appeal are independent claims 25 and 37, each of which are shown below, in both clean form and with references to the reference numerals in FIGs. 1 to 4 of the present application and page and line numbers of the specification.

25. A computer system for providing a travel insurance product via an electronic network comprising:

- a computer server system, the server system including,
  - a verification routine arranged to receive an identification request sent from a subscriber via the electronic network to the server system to verify the subscriber,
  - a receiving module arranged to receive a subscriber request sent via the electronic network for the travel insurance product,
  - a pricing module arranged to compute a price for the travel insurance product requested by the subscriber utilizing an object model stored in a database implemented on the computer server system modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,
  - a payment module arranged to communicate the price to the subscriber and receive payment details from the subscriber via the electronic network to execute payment via electronic transfer, and whereupon payment has been executed,
  - an issuing component arranged to issue the insurance product to the subscriber and update the object model, characterised in that, the issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued travel insurance product via the electronic network by adjusting the combination of attributes through an electronic interface.

25. A computer system (1, 3) for providing a travel insurance product via an electronic network (4) comprising:

a computer server system (1,3), the server system including,

- a verification routine arranged to receive an identification request sent from a subscriber via the electronic network to the server system to verify (page 3, lines 3-5, page 10, lines 1-3) the subscriber (7),
- a receiving module arranged to receive a subscriber request (page 3, lines 27-28) sent via the electronic network (4) for the travel insurance product,
- a pricing module arranged to compute a price for the travel insurance product requested by the subscriber (7) utilizing an object model (page 13, lines 2-21) stored in a database (6) implemented on the computer server system (3) modelling the travel insurance product as issued to the subscriber (7), the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product (page 13, lines 7-14),
- a payment module arranged to communicate the price to the subscriber (7) and receive payment details from the subscriber via the electronic network to execute payment via electronic transfer, and whereupon payment has been executed (page 14, lines 1-22),
- an issuing component arranged to issue the insurance product to the subscriber (7) and update the object model, characterised in that, the issuing component of the server system (3), in response to a further subscriber request allows the subscriber (7) to vary at least one term of the issued travel insurance product via the electronic network (4) by adjusting the combination of attributes through an electronic interface (page 3, lines 22-33, page 14, lines 19-29).

37. A method for providing a travel insurance product on a computer network comprising the steps of:

- verifying the subscriber with a verification routine executed on a server system device arranged to receive an identification request from a subscriber via the computer network,
- receiving a request for the travel insurance product with a receiving module arranged to receive an electronic insurance request from the subscriber via the computer network,
- calculating a price for the travel insurance product requested by the subscriber with a pricing module executing on a computing device utilizing an object model stored in a database implemented on the computer network modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,
- receiving payment details from the subscriber, and whereupon the payment details have been received, executing an electronic transfer with a payment module, the module utilizing the payment details received,
- issuing the insurance product to the subscriber and updating the object model with an issuing component executing on a computing device, characterised in that the issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued insurance product via the computing network by adjusting the combination of attributes.

37. A method for providing a travel insurance product on a computer network (4) comprising the steps of:

- verifying the subscriber (7) with a verification routine executed on a server system device (3) arranged to receive an identification request from a subscriber (7) via the computer network (4) (page 3, lines 3-5, page 10, lines 1-3),

- receiving a request for the travel insurance product with a receiving module arranged to receive an electronic insurance request from the subscriber (7) via the computer network (4) (page 3, lines 27-28),
- calculating a price for the travel insurance product requested by the subscriber with a pricing module executing on a computing device utilizing an object model (page 13, lines 2-21) stored in a database (6) implemented on the computer network modelling the travel insurance product as issued to the subscriber (7), the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product (page 13, lines 7-14),
- receiving payment details from the subscriber (7), and whereupon the payment details have been received, executing an electronic transfer with a payment module, the module utilizing the payment details received (page 14, lines 1-22),
- issuing the insurance product to the subscriber (7) and updating the object model with an issuing component executing on a computing device (3), characterised in that the issuing component of the server system (3), in response to a further subscriber request allows the subscriber (7) to vary at least one term of the issued insurance product via the computing network (4) by adjusting the combination of attributes (page 3, lines 22-33, page 14, lines 19-29).

**GROUND OF REJECTION TO BE REVIEWED ON APPEAL**

**Issue 1:** Whether Claims 25-27 and 37 are patentable under 35 U.S.C. 102(e) over U.S. Published Patent Application No. 2002/0091550 to White et al. (hereinafter “White”).

**Issue 2:** Whether Claims 28-30 are patentable under 35 U.S.C. 103(a) over White in view of U.S. Published Patent Application No. 2001/0037265 to Kleinberg (hereinafter “Kleinberg”).

**Issue 3:** Whether Claims 31-33 are patentable under 35 U.S.C. 103(a) over White in view of Kleinberg and further in view of U.S. Patent No. 6,341,265 to Provost et al. (hereinafter “Provost”).

**Issue 4:** Whether Claims 34-36 are patentable under 35 U.S.C. 103(a) over White in view of Kleinberg and Provost and further in view of U.S. Patent No. 6,070,148 to Mori et al. (hereinafter “Mori”).



## **ARGUMENT**

### **Issue 1: Whether Claims 25-27 and 37 are patentable under 35 U.S.C. 102(e) over U.S. Published Patent Application No. 2002/0091550 to White et al. (hereinafter “White”).**

In the Office Action of January 19, 2011, the Examiner continues to reject independent Claims 25 and 37.

As per claim 25, the Examiner on pages 2 and 3 of the Office Action asserts that White teaches:

“a pricing module arranged to compute a price for the travel insurance product requested by the subscriber utilizing an object model stored in a database implemented on the computer server system modeling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product (White: para. 122; 131-132; para. 155-165),

...

an issuing component arranged to issue the insurance product to the subscriber and update the object model (White: para. 95), characterized in that the issuing component of the server system, in response to a further subscriber request, allows the subscriber to vary at least one term of the issued travel insurance product via the electronic network by adjusting the combination of attributes through an electronic interface (White: para. 122-123; 140; para. 153; para. 183).”

As per claim 37, the Examiner on page 4 of the Office Action asserts that:

“it is a method claim which repeats the same limitations of claim 25, the corresponding system claim, as a series of process steps as opposed to a collection of elements. Since the teaching of White discloses the structural elements that constitute the system of claim 25, it is respectfully submitted that they perform the underlying process steps, as well. As such, the limitations of claim 37 are rejected for the same reasons given above for claim 25.”

The Appellant submits that the Examiner is mischaracterizing the reference and ignoring what it actually, explicitly does disclose.

Claim 25 recites in part:

“a pricing module arranged to compute a price for the travel insurance product requested by the subscriber utilizing an object model stored in a database implemented on the computer server system modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,

...

an issuing component arranged to issue the insurance product to the subscriber and update the object model, characterised in that, the issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued travel insurance product via the electronic network by adjusting the combination of attributes through an electronic interface” (emphasis added)

Similarly claim 37 recites in part:

“calculating a price for the travel insurance product requested by the subscriber with a pricing module executing on a computing device utilizing an object model stored in a database implemented on the computer network modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,

...

issuing the insurance product to the subscriber and updating the object model with an issuing component executing on a computing device, characterised in that the issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued insurance product via the computing network by adjusting the combination of attributes.” (emphasis added)

In contrast, White in paragraphs [0095], [0122]-[0123], [0131]-[0132], [0140], [0153] and [0155]-[0165], referred to by the Examiner, does not in any way disclose such an “object model ... modeling the travel insurance product as issued to the subscriber” as recited in claim 25 and similarly in claim 37. (emphasis added)

White does discuss “dynamic pricing”. However, as defined by White in paragraph [0015], “Dynamic pricing is a competitive strategy that complements and takes advantage of the new models of customer engagement. Dynamic pricing maximizes the seller's economic benefit by finding the optimal tradeoff between a customer's likelihood to accept an offer and the revenue value of that offer.” Thus, dynamic pricing as taught by White occurs before the policy is issued. White further discusses dynamic pricing in paragraphs [0139]-[0162].

There is no simply no teaching or suggestion in White that dynamic pricing “*allows the subscriber to vary at least one term of the issued travel insurance product*”, as recited in claim 25 and similarly in claim 37.

In White in paragraphs [0155]-[0165] there is discussion of the use of a pricing tier table. In paragraph [0156] White teaches:

“Each time an offer is requested 640 from an offer environment 650, a lookup is performed against this table to determine which pricing tier or dynamic pricing adjustment factor should be used to compute a rate for the offer. This information, together with values for rating variables derived from the applicant information is sent to the rating engine 660. The rating engine returns a rate for the individual request for offer of insurance.”

However, there is no simply no teaching or suggestion use of the pricing table in White “*allows the subscriber to vary at least one term of the issued travel insurance product*”, as recited in claim 25 and similarly in claim 37. All that White teaches is that the pricing tier or dynamic pricing is used to compute a rate for an offer of an original insurance policy.

As stated at page 13, lines 12-14 of the present application, “an object model defines a relationship between insurance products, policies sold to subscribers for those products and the extensions and claims for each policy”. There is no teaching in White that dynamic pricing or the pricing tier table defines any relationship between insurance

products, policies already sold to subscribers and extensions of those already sold policies.

White et al. merely refers to a "pricing tier assigning table" which is immediately deemed irrelevant to an associated policy after the policy is issued. However, the object model of the present invention is related not only to a predetermined price for each possible "type" of insurance, but rather it is tied to each particular insurance product and indeed, to each policy sold and issued to a subscriber. It is the use of an object model that allows an insurance policy to be modified after a subscriber has already made a purchase and been issued an insurance policy.

As described on page 14, lines 19-29 of the present application, once a subscriber has made a purchase, the software provides the subscriber with details regarding the coverage, and it allows them to change their details as necessary. These details are not limited just to the identifying details of the subscriber, but also the terms of the policy. It is the use of the object model which defines a set of business rules that enables the insurer to place particular parameters around what a subscriber can and cannot do with their policy, whilst enabling the subscriber to interact with and make changes to their policy.

White teaches in paragraph [0183] that dynamic pricing may be updated on a periodic basis "to generate rate change recommendations based on customer demand and consumption behavior. ... The input to this process is the most recent observations of sales pace and conversion rate by segmenting variable. The output is the price tier assignment that maximizes expected premium system-wide." However, these new offers are unrelated to the policies which have already been issued, but rather to new policies that will be issued.

Further, as stated in remarks filed on October 27, 2010 in response to a non-final Office Action mailed on April 27, 2010:

In White paragraphs [0122], [0131]-[0132] and [0155]-[0165], there is discussion of “*dynamic pricing*”, and in particular at Paragraphs [0155]-[0165] there is discussion of the use of a Pricing Tier Assignment Table. However a table is entirely different from and cannot be compared to the use of an object model. As stated at page 13, lines 12-14 of the present application, “An object model defines a relationship between insurance products, policies sold to subscribers for those products and the extensions and claims for each policy”. A mere table which holds price information is different. An example of the operation of the object model is on page 10, lines 4 to 29 and more particularly on page 10, lines 12-16 of the present application which state: “All of the above functions have specific business rules associated with each function. The database contains the rules, and the rules are cross-referenced with the subscriber’s policy to ensure the subscriber is able and has permission to execute the function requested”.

The disclosure of White merely discloses a pricing model which operates to calculate the price of an offer of insurance, and does not teach the usage of an object model having attributes to “allow the subscriber” to “vary at least one term of an issued travel insurance policy” by “adjusting the combination of attributes”.

That White is concerned only with offers of insurance is evident throughout the Figures and description in White and is also evident in the Abstract of White, which states “based on the received relevant data, an offer of insurance is generated for the particular applicant”. Nowhere does White discuss a model or modeling for issued insurance, such that a subscriber is allowed to change a term of the issued policy. Thus, White effectively teaches away from claims 25 and 37.

MPEP § 2131.01: TO ANTICIPATE A CLAIM, THE REFERENCE MUST TEACH EVERY ELEMENT OF THE CLAIM

"A claim is anticipated only if each and every element as set forth in the claim is found, either expressly or inherently described, in a single prior art reference." *Verdegaal Bros. v. Union Oil Co. of California*, 814 F.2d 628, 631, 2 USPQ2d 1051, 1053 (Fed. Cir. 1987). >"When a claim covers several structures or compositions, either generically or as alternatives, the claim is deemed anticipated if any of the structures or compositions within the scope of the claim is known in the prior art." *Brown v. 3M*, 265 F.3d 1349, 1351, 60 USPQ2d 1375, 1376 (Fed. Cir. 2001) (claim to a system for setting a computer clock to an offset time to address the Year 2000 (Y2K) problem, applicable to records with year date data in "at least one of two-digit, three-digit, or four-digit" representations, was held anticipated by a system that offsets year dates in only two-digit formats). See also MPEP § 2131.02.< "The identical invention must be shown in as complete detail as is contained in the ... claim." *Richardson v. Suzuki Motor Co.*, 868 F.2d 1226, 1236, 9 USPQ2d 1913, 1920 (Fed. Cir. 1989). The elements must be arranged as required by the claim, but this is not an *ipsissimis verbis* test, i.e., identity of terminology is not required. *In re Bond*, 910 F.2d 831, 15 USPQ2d 1566 (Fed. Cir. 1990). Note that, in some circumstances, it is permissible to use multiple references in a 35 U.S.C. 102 rejection. See.

Because White does not teach or suggest all the limitations of independent claims 25 and 37, Appellant submits the Section 102(e) rejection of claims 25 and 37 in view of White is improper.

Thus, Appellant submits that claims 25 and 37 are not anticipated by U.S. Published Patent Application No. 2002/0091550 to White et al. and that claims 25 and 37 are allowable.

In view of all of the preceding, Appellants respectfully submit that claims 25 and 37 are in fact novel and non-obvious over the art on record, and request that the Examiner's rejection of these claims be overturned on Appeal.

Claims 26-36 depend variously from claim 25. "If an independent claim is nonobvious under 35 U.S.C. 103, then any claim depending therefrom is nonobvious." *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988). Therefore, in light of the above discussion of the independent claims, Appellants submit that dependent claims 26-36 are also allowable at least by

virtue of their particular dependencies as well as the additional limitations recited by each of these claims.

**Issue 2: Whether Claims 28-30 are patentable under 35 U.S.C. 103(a) over White in view of U.S. Published Patent Application No. 2001/0037265 to Kleinberg (hereinafter “Kleinberg”).**

Claims 28-30 depend on claim 25. “If an independent claim is nonobvious under 35 U.S.C. 103, then any claim depending therefrom is nonobvious.” *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988). Therefore, in light of the above discussion of the independent claims, Appellants submit that dependent claims 28-30 are also allowable at least by virtue of their particular dependencies as well as the additional limitations recited by each of these claims.

The Examiner in paragraph 12 on page 5 of the Office Action states:

“Kleinberg teaches wherein the database includes a first and a second table, the first table being utilized to calculate the cost to the subscriber when the subscriber is issued with the insurance product, and the second table being utilized to calculate the cost to the subscriber when the subscriber varies the at least one term in the insurance product (Kleinberg: para. 0039- 0040; figure 3).”

Paragraphs [0039] and [0040] of Kleinberg are shown below:

[0039] Similarly, benefits table 590 supports a comparison tool by which customers can readily compare different plans. In an embodiment of the present invention the plan comparisons are presented in a spreadsheet format, but other presentation formats can be readily accommodated using the underlying database information. As with the policy picker, the information is displayed as short descriptions with links to lengthier or more comprehensive descriptions.

[0040] In a preferred embodiment of the present invention, the plans presented by the policy picker tool, by the comparison tool, or by browsing the web site may be limited by the affiliate and/or user characteristics, thus preventing user frustration should, for example, a customer want to purchase a policy unavailable from the affiliate or only available if the customer is not a US citizen. An affiliate may limit the policies available to customers referred by their web site if they want to provide less complex choice to the customer or if they cannot legally receive commission on the sale of the policies. In a preferred embodiment of the present invention, once a customer selects a plan, he may purchase a policy on-line by becoming a registered user. If the

user registration information reveals that the user cannot legally purchase the selected policy, an alternative policy is quoted. The user information is validated and a policy is processed, either directly by the selling company or through an intermediary. If a user is not transferred directly to an Insurance Company's system for processing, then the user information is sent to the Insurance Company using encrypted electronic mail. The present invention also supports telephone sales by posting an affiliate identification code on each displayed web page so that the telephone sales agent can request the affiliate identification when processing the sale.

There is simply no teaching or suggestion in paragraphs [0039] and [0040] of Kleinberg of *“the second table being utilized to calculate the cost to the subscriber when the subscriber varies the at least one term in the insurance product”*, as stated by the Examiner in paragraph 12 of the Office Action. All that paragraphs [0039] and [0040] discuss is a “benefits table 590” that “supports a comparison tool by which customers can readily compare different plans”. There is no teaching or suggestion of a system that *“allows the subscriber to vary at least one term of the issued travel insurance product”*, as recited in claim 25 and similarly in claim 37.

Further, as discussed above White does not teach all of the features of Claim 25. Neither does Kleinberg, as Kleinberg is concerned with a method and system for selling insurance on-line, particularly where there is an affiliate involved in the transaction who may receive a fee. Kleinberg combined with White does not teach or suggest the features disclosed in claims 28-30.

Therefore, Applicant submits that claims 28-30 are not obvious in view of White and Kleinberg and should be allowed.

**Issue 3: Whether Claims 31-33 are patentable under 35 U.S.C. 103(a) over White in view of Kleinberg and further in view of U.S. Patent No. 6,341,265 to Provost et al. (hereinafter “Provost”).**

Claims 31-33 depend on claim 25. “If an independent claim is nonobvious under 35 U.S.C. 103, then any claim depending therefrom is nonobvious.” *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988). Therefore, in light of the above discussion of the independent claims, Appellants submit that dependent claims 31-33 are also allowable at least by virtue of their particular dependencies as well as the additional limitations recited by each of these claims.



Further, claim 31 is directed to a system where insurance claims are compared to a set of predetermined rules. This is an essentially automatic process with no intervention from a person or persons. Provost is silent on such an automatic system. The Examiner relies on Figures 3 and 4B; however, it is evident in the Abstract of Provost, shown below, that a medical technician is very involved, which teaches away from such an automatic system of predetermined rules.

“Methods and systems for interactively creating and submitting insurance claims and determining whether the submitted claims are in condition for payment by an insurer. *A medical technician operating* a client computer establishes communication with a remote server. The remote server transmits a claim form to the client computer for display to the medical technician. Using the claim form, *the technician enters* patient identification information, which is transmitted to the server to determine whether the patient is a beneficiary of an approved insurance plan. If the patient is a beneficiary, *the technician can prepare* an insurance claim using the claim form displayed by the client computer. *The technician enters* a diagnosis code and a treatment code representing the diagnosis and treatment of the patient. The diagnosis and treatment codes are transmitted to the remote server, which processes the codes to determine whether the claim corresponds to health care services that are approved for payment. If the insurance claim is not in condition for payment, *the medical technician is notified*. *The medical technician can then amend the insurance claim* as necessary and resubmit the claim.”

Provost does teach a server system that performs rudimentary checks such as whether the electronic form for a claim has been correctly filled out; however, this is different from the claim information being compared to a predetermined rule set. Indeed, Provost et al. is silent on the use of a predetermined rule set.

Therefore, Applicant submits that claims 31-33 are not obvious in view of Provost, White and Kleinberg and should be allowed.

**Issue 4: Whether Claims 34-36 are patentable under 35 U.S.C. 103(a) over White in view of Kleinberg and Provost and further in view of U.S. Patent No. 6,070,148 to Mori et al. (hereinafter “Mori”).**

Claims 34-36 depend on claim 25. “If an independent claim is nonobvious under 35 U.S.C. 103, then any claim depending therefrom is nonobvious.” *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988). Therefore, in light of the above discussion of the independent claims, Appellants submit that dependent claims 34-36 are also allowable at least by virtue of their particular dependencies as well as the additional limitations recited by each of these claims.

Further, the Examiner contends that Mori et al. teaches the feature in Claim 34 of “at least one term of the insurance product is the intended destination of the subscriber”.

Mori et al. is not directed to an insurance system, but rather is directed generally to a system for recording information with regard to business expenses. Mori et al. is completely unrelated to a system for providing a travel insurance product and indeed, even the sections referenced by the Examiner, namely Figures 14 and 15 and column 2, lines 44 to 53, discuss, not an insurance product, but rather the issue of travel expenses.

Whilst the Examiner contends that Mori et al. is concerned with electronic commerce, Applicant submits that travel expenses are not relevant to an insurance product other than the fact that travel insurance is a possible travel expense. Accordingly, there would be absolutely no motivation for a person skilled in the art to review Mori et al., as Mori et al. has no connection with insurance products, or with travel insurance. Even if a person skilled in the art were to review Mori et al., they would not find any information which would be useful in the construction of a travel insurance system.

Therefore, Applicant submits that the teachings of Mori including Figures 14 and 15, that disclose an example of a destination of a user and the money spent by a user, are not relevant whatsoever to the construction of an insurance product.

Therefore, Applicant submits that claims 34-36 are not obvious in view of Mori, Provost, White and Kleinberg and should be allowed.

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**CONCLUSION**

For the extensive reasons advanced above, Appellants respectfully contend that each claim is patentable. Therefore, reversal of all rejections and objections and re-opening of the prosecution is respectfully solicited.

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Enclosures -    Claims Appendix  
                     Evidence Appendix  
                     Related Proceedings Appendix

**CLAIMS APPENDIX A**

1. - 24. (canceled)

25. A computer system for providing a travel insurance product via an electronic network comprising:

- a computer server system, the server system including,
  - a verification routine arranged to receive an identification request sent from a subscriber via the electronic network to the server system to verify the subscriber,
  - a receiving module arranged to receive a subscriber request sent via the electronic network for the travel insurance product,
  - a pricing module arranged to compute a price for the travel insurance product requested by the subscriber utilizing an object model stored in a database implemented on the computer server system modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,
  - a payment module arranged to communicate the price to the subscriber and receive payment details from the subscriber via the electronic network to execute payment via electronic transfer, and whereupon payment has been executed,
  - an issuing component arranged to issue the insurance product to the subscriber and update the object model, characterised in that, the issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued travel insurance product via the electronic network by adjusting the combination of attributes through an electronic interface.

26. A computer system in accordance with Claim 25, further comprising:

a client system having an interface that prompts information from the subscriber wherein the information sent to the server system via the electronic network includes at least one of verifying the subscriber, requesting an insurance product and submitting details for payment.

27. A computer system in accordance with Claim 26, wherein the system further includes a telecommunication module arranged to transmit the information between the client system and the server system.

28. A computer system in accordance with Claim 26 or 27, further comprising a database that includes at least one table of data, wherein the information obtained from the subscriber is utilised to locate a value in the at least one table of data, the value being the purchase cost of the insurance product.

29. A computer system in accordance with Claim 28, wherein the database includes a first and a second table, the first table being utilised to calculate the cost to the subscriber when the subscriber is issued with the insurance product, and the second table being utilised to calculate the cost to the subscriber when the subscriber varies the at least one term in the insurance product.

30. A computer system in accordance with Claim 29, comprising an authenticating module to authenticate the subscriber before obtaining information from the subscriber.

31. A computer system in accordance with Claim 30, wherein the client system further includes a claims interface to prompt a subscriber to provide claim information, the claim information being compared with a predetermined rule set contained within the database, to determine whether the subscriber is entitled to receive compensation for the claim.

32. A computer system in accordance with Claim 31, wherein the server system includes an interface which communicates the claim information to an insurance underwriter for further processing.

33. A computer system in accordance with Claim 32 wherein the at least one term of the insurance product is the time period for which the insurance product is valid.

34. A system in accordance with Claim 32, wherein the at least one term of the insurance product is the intended destination of the subscriber.

35. A computer system in accordance with Claim 34, wherein the at least one term of the insurance product is the total coverage value of the insurance policy.

36. A computer system in accordance with Claim 35, wherein the insurance product is travel insurance.

37. A method for providing a travel insurance product on a computer network comprising the steps of:

- verifying the subscriber with a verification routine executed on a server system device arranged to receive an identification request from a subscriber via the computer network,
- receiving a request for the travel insurance product with a receiving module arranged to receive an electronic insurance request from the subscriber via the computer network,
- calculating a price for the travel insurance product requested by the subscriber with a pricing module executing on a computing device utilizing an object model stored in a database implemented on the computer network modelling the travel insurance product as issued to the subscriber, the model having a plurality of attributes of a product, wherein the model enables a combination of the attributes to be created, the combination arranged to determine the price for the travel insurance product,
- receiving payment details from the subscriber, and whereupon the payment details have been received, executing an electronic transfer with a payment module, the module utilizing the payment details received,
- issuing the insurance product to the subscriber and updating the object model with an issuing component executing on a computing device, characterised in that the

issuing component of the server system, in response to a further subscriber request allows the subscriber to vary at least one term of the issued insurance product via the computing network by adjusting the combination of attributes.



**EVIDENCE APPENDIX B**

None

**RELATED PROCEEDINGS APPENDIX C**

There are no other appeals or interferences related to the present application.